DOCUMENT RESUME

ED 279 995 CG 019 804

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TITLE	Issues in Multicultural Counseling. Highlights: An ERIC/CAPS Digest.
INSTITUTION	ERIC Clearinghouse on Counseling and Personnel Services, Ann Arbor, Mich.
SPONS AGENCY	Office of Educational Research and Improvement (ED), Washington, D.C.
PUB DATE	87
CONTRACT	400-86-0014
NOTE	3p.
AVAILABLE FROM	ERIC/CAPS, University of Michigan, School of Education, Room 2108, 610 East University Street, Ann Arbor, MI 48109-1259 (free).
PUB TYPE	Information Analyses - ERIC Information Analysis Products (071)
EDRS PRICE	MF01/PC01 Plus Postage.
DESCRIPTORS	*Client Characteristics (Human Services); *Counselor Attitudes; *Counselor Characteristics; Counselor Client Relationship; *Cultural Influences; Cultural Pluralism; *Ethnic Stereotypes; *Individual Differences
IDENTIFIERS	ERIC Digests; *Multicultural Counseling

ABSTRACT

This fact sheet examines the impact of cultural diversity in the United States on the counseling profession. Three major difficulties for multicultural counseling created by this diversity are considered: (1) the counselor's own culture, attitudes, and theoretical perspective; (2) the client's culture; and (3) the multiplicity of variables comprising an individual's identity. Thirteen documents are cited. (NB)

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HIGHLIGHTS

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Issues in Multicultural Counseling

CG 014804

Overview

Traditionally, the United States has been defined as a melting pot in which various cultures are assimilated and blended as immigrants mold their beliefs and behavior to the dominant white culture. The melting pot image has given way to a more pluralistic ideal in which immigrants maintain their cultural identity while learning to function in the society. Not only are immigrants still flocking to America from Cuba, Haiti, Vietnam, Guatemala, El Salvador, and other countries (LaFromboise, 1985), but minorities already living in the United States have asserted their right to have equal access to counseling (Arcinega & Newlou, 1981). This diversity creates three major difficulties for multicultural counseling: the counselor's own culture, attitudes, and theoretical perspective; the client's culture; and the multiplicity of variables comprising an individual's identity (Pedersen, 1986).

The Counselor's Culture

A major assumption for culturally effective counseling and psychotherapy is that we can acknowledge our own basic tendencies, the ways we comprehend other cultures, and the limits our culture places on our comprehension. It is essential to understand our own cultural heritage and world view before we set about understanding and assisting other people (Ibrahim, 1985; Lauver, 1986). This understanding includes an awareness of one's own philosophies of life and capabilities, a recognition of differen; structures of reasoning, and an understanding of their effects on one's communication and helping style (Ibrahim, 1985). Lack of such understanding may hinder effective intervention (McKenzie, 1986).

Part of this self-awareness is the acknowledgment that the "counselor culture" has at its core a set of white cultural values and norms by which clients are judged (Katz, 1985; Lauver, 1986). This acculturation is simultaneously general, professional, and personal (Lauver, 1986). Underlying assumptions about a cultural group, personal stereotypes or racism, and traditional counseling approaches may all signal acquiescence to white culture. Identification of specific white cultural values and their influence on counseling will help to counter the effects of this framework (Katz,1985).

Adherence to a specific counseling theory or method may also limit the success of counseling. Many cultural groups do not share the values implied by the methods and thus do not share the counselor's expectations for the conduct or outcome of the counseling session. To counter these differences, effective counselors must investigate their clients' cultural background and be open to flexible definitions of "appropriate" or "correct" behavior (LaFromboise, 1985).

Another counseling barrier is language. Language differences may be perhaps the most important stumbling block to effective multicultural counseling and assessment (Romero, 1985). Language barriers impede the counseling process when clients cannot express the complexity of their thoughts and feelings or resist discussing affectively charged issues. Counselors, too, may become frustrated by their lack of bilingual ability. At the worst, language barriers may lead to misdiagnosis and inappropriate placement (Romero, 1985).

The Client's Culture

As counselors incorporate a greater awareness of their clients' culture into their theory and practice, they must realize that, historically, cultural differences have been viewed as deficits (Romero, 1985). Adherence to white cultural values has brought about a naive imposition of narrowly defined criteria for normality on culturally diverse people (Pedersen,1986). Multicultural counseling, however, seeks to rectifiy this imbalance by acknowledging cultural diversity, appreciating the value of the culture and using it to aid the client. Although the variety of cultures is vast, the following examples indicate the types of cultural issues and their effects on the counseling situation.

In the cultural value system of Chinese Americans, passivity rather than assertiveness is revered, quiescence rather than verbal articulation is a sign of wisdom, and self-effacement rather than confrontation is a model of refinement (Ching & Prosen, 1980). Since humility and modesty are so valued, it is difficult for counselors to draw out a response from a Chinese American in a group setting. The reticence which reinforces silence and withdrawal as appropriate ways of dealing with conflict may be interpreted as resistance by the uneducated counselor. Democratic counselors may also be uneasy with the role of the "all-knowing father" that the Chinese respect for authority bestows on them (Ching & Prosen,1980).

Africans place great value on the family, especially their children, who are seen as a gift from God, and on social relationships, with a great emphasis on the community and their place in it. In this context social conflict resolution becomes important, so that peace and equilibrium may be restored to the community, while personal conduct becomes secondary (McFadden & Gbekobov, 1984).

Many African values also influence contemporary American Black behavior, including the notion of unity, the survival of the group, oral tradition, extended kinship networks, self-concept, concept of time, and control of the environment.

In his discussion of counseling the Northern Natives of Canada, Darou (1987) notes that counseling is seen as cultural racism when it does not fit native values. These values are: cooperation, concreteness, lack of interference, respect for elders, the tendency to organize by space not time, and dealing with the land as an animate not inanimate object.

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Bernal and Flores-Ortiz (1982) point out that Latin cultures view the family as the primary source of support for its members. Any suggestion that the family is not fulfilling that obligation can bring shame, added stress, and an increased reluctance to seek professional services. Involving the family in treatment will most likely insure successful counseling outcomes with Latinos.

Individual Differences

There is always the danger of stereotyping clients and of confusing other influences, especially race and socioeconomic status, with cultural influences. The most obvious danger in counseling is to oversimplify the client's social system by emphasizing the most obvious aspects of their background (Pedersen, 1986). While universal categories are necessary to understand human experience, losing sight of specific individual factors would lead to ethical violations (Ibrahim, 1985). Individual clients are influenced by race, ethnicity, national origin, life stage, educational level, social class, and sex roles (Ibrahim, 1985). Counselors must view the identity and development of culturally diverse people in terms of multiple, interactive factors, rather than a strictly cultural framework (Romero, 1985). A pluralistic counselor considers all facets of the client's personal history, family history, and social and cultural orientation (Arcinega & Newlou, 1981).

One of the most important differences for multicultural counseling is the difference between race and culture. Differences exist among racial groups as well as within each group. Various ethnic identifications exist within each of the five racial groups. Some examples include: Asian/Island Pacific (Japanese, Korean, and Vietnamese); Black (Cajun, Haitian, and Tanzanian); Hispanic (Cuban, Mexican, and Puerto Rican); Native American (Kiowa, Hopi, and Zuni); and White (British, Dutch, and German). Even though these ethnic groups may share the physical characteristics of race, they may not necessarily share the value and belief structures of a common culture (Katz, 1985). Counselors must be cautious in assuming, for instance, that all Blacks or all Asians have similar cultural backgrounds. McKenzie (1986) notes that West Indian American clients do not have the same cultural experience of Afro-American Blacks and are culturally different from other Black subculture groups. Counselors who can understand West Indian dialects and the accompanying nonverbal language are more likely to achieve positive outcomes with these clients.

Conclusion

Although it is impossible to change backgrounds, pluralistic counselors can avoid the problems of stereotyping and false expectations by examining their own values and norms, researching their clients' background, and finding counseling methods to suit the clients' needs. Counselors cannot adopt their clients' ethnicity or cultural heritage, but they can become more sensitive to these things and to their own and their clients' biases. Clinical sensitivity toward client expectation, attributions, values, roles, beliefs, and themes of coping and vulnerability is always necessary for effective outcomes (LaFromboise, 1985). Three questions which counselors might use in assessing their approach are as follows (Jereb, 1982): (1) Within what framework or context can I understand this client (assessment)? (2) Within what context do client and counselor determine what change in functioning is desirable (goal)? (3) What techniques can be used to effect the desired change (intervention)? Examination of their own assumptions, acceptance of the multiplicity of variables that constitute an individual's identity, and development of a client centered, balanced counseling method will aid the multicultural counselor in providing effective help.

Resource Documents

Arcinega, M., & Newlou, B. J. (1981). A theoretical rationale for cross-cultural family counseling. *The School Counselor, 28*(2), 89-96. (EJ 253 501)

Bernal, G., & Flores-Ortiz, Y. (1982). Latino families in therapy: Engagement and evaluation. *Journal of Marital and Family Therapy, 8*(3), 337-365. (EJ 265 611)

Ching, W., & Prosen, S. S. (1980). Asian-Americans in group counseling: A case of cultural dissonance. *Journal for Specialists in Group Work, 5*(4), 228-232. (EJ 236 220)

Darou, W. G. (1987). Counselling and the northern native. *Canadian Journal of Counselling, 21*(1), 33-41. (CG 531 746)

Ibrahim, F. A. (1985). Effective cross-cultural counseling and psychotherapy. *The Counseling Psychologist, 13*(4), 625-638. (In EJ 329 143)

Jereb, R. (1982). Assessing the adequacy of counseling theories for use with black clients. *Counseling and Values, 27*(1), 17-26. (EJ 269 649)

Katz, J. H. (1985). The sociopolitical nature of counseling. *The Counseling Psychologist, 13*(4), 615-623. (In EJ 329 143)

LaFromboise, T. D. (1985). The role of cultural diversity in counseling psychology. *The Counseling Psychologist, 13*(4), 649-655. (In EJ 329 143)

Lauver, P. J. (1986, February). *Extending counseling cross-culturally: Invisible barriers.* Paper presented at the annual meeting of the California Association for Counseling and Development, San Francisco, CA. (ED 274 937)

McFadden, J., & Gbekobov, K. N. (1984). Counseling African children in the United States. *Elementary School Guidance and Counseling, 18*(3), 225-230. (EJ 299 280)

McKenzie, V. M. (1986). Ethnographic findings on West Indian-American clients. *Journal of Counseling and Development, 65*(1), 40-44. (EJ 343 533)

Pederson, P. (1986). The cultural role of conceptual and contextual support systems in counseling. *American Mental Health Counselors Association Journal, 8*(1), 35-42. (EJ 332 691)

Romero, D. (1985). Cross-cultural counseling: Brief reactions for the practitioner. *The Counseling Psychologist, 13*(4), 665-671. (In EJ 329 143)

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1987

This publication was prepared with funding from the Office of Educational Research and Improvement, U.S. Department of Education, under contract no. 400-86-0014. The opinions expressed in this report do not necessarily reflect the positions or policies of OERI or the Department of Education.